

BEST AVAILABLE COPY

10629783

PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003

Application or Docket Number

10629783

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS	4	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	4 minus 20	
INDEPENDENT CLAIMS	1 minus 3	2
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

SMALL ENTITY TYPE OR OTHER THAN SMALL ENTITY

RATE	FEES	RATE	FEES
BASIC FEE	375.00	OR BASIC FEE	750.00
X\$ 9=		OR X\$18=	
X42=		OR X84=	
+140=		OR +280=	
TOTAL		OR TOTAL	750.00

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMEND.DED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT #	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	(Column 3)	
				NUMBER FILED	NUMBER PREVIOUSLY PAID FOR
Total	4	Minus	20		
Independent		Minus	3		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

SMALL ENTITY OR OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		OR X\$18=	
X42=		OR X84=	
+140=		OR +280=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

BEST AVAILABLE COPY

02/02/05

AMENDMENT #	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	(Column 3)	
				NUMBER FILED	NUMBER PREVIOUSLY PAID FOR
Total	2	Minus	20		
Independent	1	Minus	3		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		OR X\$18=	
X42=		OR X84=	
+140=		OR +280=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

AMENDMENT #	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	(Column 3)	
				NUMBER FILED	NUMBER PREVIOUSLY PAID FOR
Total	2	Minus	20		
Independent	1	Minus	3		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		OR X\$18=	
X42=		OR X84=	
+140=		OR +200=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

3/17/05
 (Column 1)
 CLAIMS REMAINING AFTER AMENDMENT

AMENDMENT #	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	(Column 3)	
				NUMBER FILED	NUMBER PREVIOUSLY PAID FOR
Total	2	Minus	20		
Independent	1	Minus	3		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

(Column 1) (Column 3)
 THIS IS THE HIGHEST NUMBER PREVIOUSLY PAID FOR IN THIS SECTION.
 THIS IS THE HIGHEST NUMBER PREVIOUSLY PAID FOR IN THIS SECTION.
 Total or in this section, enter the highest number found in the appropriate box in column 1.